| COMBINED DECLAR   | ATTORNEY'S DOCKET PB60179                  |                       |                      |  |  |  |  |
|---|--|-----------------------|----------------------|--|--|--|--|
| APPLICATION WITE  | First Named Inventor:                      |                       |                      |  |  |  |  |
|   |  |                       | Ian HUGHES           |  |  |  |  |
|   |  |                       | Complete if known:   |  |  |  |  |
| ( ) Declaration submitted with initial  |  | App No.:              |                      |  |  |  |  |
| ( ) Declaration submitted after initial   | Filing Date                                |                       |                      |  |  |  |  |
|   |  |                       |                      |  |  |  |  |
|   |  | Group Art Unit:       |                      |  |  |  |  |
|   | ·  |                       |                      |  |  |  |  |
| As below named inventor. I hereby declare that:   |  |                       |                      |  |  |  |  |
| My residence, post office address and citizenship are as stated below next to my name.  |  |                       |                      |  |  |  |  |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  |  |                       |                      |  |  |  |  |
| ; A SYSTEM  |  |                       |                      |  |  |  |  |
| the specification of which (check only one item below):   |  |                       |                      |  |  |  |  |
| [ ]is attached hereto.  OR  |  |                       |                      |  |  |  |  |
| [x] was filed on _ as Un  | ited States application Serial No          | or PCT International  |                      |  |  |  |  |
| Application Number PCT/GB2004/001513 filed 07 April 2004 and was amended on (MM/DD/YYYY)  (if applicable)   |  |                       |                      |  |  |  |  |
| I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.  |  |                       |                      |  |  |  |  |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.   |  |                       |                      |  |  |  |  |
| I hereby claim foreign priority benefits under 35 U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed: |  |                       |                      |  |  |  |  |
|   | nal application having a filing date befor |                       | priority is claimed: |  |  |  |  |
| Prior Foreign Application   | Country                                    | Foreign Filing Date   | PRIORITY             |  |  |  |  |
| Number (s)  |  | (MM/DD/YYYY))         | CLAIMED              |  |  |  |  |
| 1. <b>0307999.3</b> 2.  | GB   | 07 April <b>200</b> 3 | X                    |  |  |  |  |
| 3.  |  |                       |                      |  |  |  |  |
| 4.  |  |                       |                      |  |  |  |  |
| 5.  |  |                       |                      |  |  |  |  |
| I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:   |  |                       |                      |  |  |  |  |
| Application No. Filing Date (MM/DD/YYYY)  |  |                       |                      |  |  |  |  |
| 1.<br>2.  |  |                       |                      |  |  |  |  |
| 3.  |  |                       |                      |  |  |  |  |

## COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

STATE & ZIP CODE/COUNTRY

PB60179

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or

|   | PCT international f                        | iling date of this application:  |                                    | •                  | •   |                   |  |
|---|--|--|------------------------------------|--------------------|---|-------------------|--|
| PRIOF   | R U.S. PARENT                              | APPLICATION or PCT PARENT  | APPLICATION                        |                    |   |                   |  |
|   |  |  |                                    | STATUS (Check one) |   |                   |  |
| U.S.  | Parent Application or Number               | _  | Parent Filing Date PA (MM/DD/YYYY) |                    | PENDING   | ABANDONED         |  |
| ·   |  |  |                                    |                    |   |                   |  |
| prosecut  | e this application a                       | ?: As a named inventor, I hereby appoint to transact all business in the Patent and Customer Number 20462  | <del>-</del>                       |                    | •   | provided below to |  |
| Address all correspondence and telephone calls to Customer Number 23347 |  |  |                                    |                    | Direct Telephone Calls to:                        |                   |  |
|   |  |  |                                    |                    | J. Michael Strickland<br>919 483 9024             |                   |  |
| are beli<br>made a  | eved to be true; and<br>re punishable by f | tatements made herein of my own knownd further that these statements were made or imprisonment, or both, under 18 ation or any patent issuing thereon. | nade with the know                 | ledge that wil     | Iful false statement                              | s and the like so |  |
|   | FULL NAME                                  | FAMILY NAME  | FIRST GIVEN NAME                   | <del>.</del>       | SECOND GIVEN NAME/                                | INITIAL           |  |
| 2   | OF INVENTOR                                | HUGHES   | Ian                                |                    | - Paris   |                   |  |
|   | INVENTOR'S<br>SIGNATURE                    | Signature Jan Hughes   |                                    |                    | Date: 27-Mey-2004 COUNTRY OF CITIZENSHIP          |                   |  |
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| 2   | OF INVENTOR                                | WARKINGTON \   | Brian                              |                    | Herbert   |                   |  |
|   | INVENTOR'S<br>SIGNATURE                    | Signature Color.   |                                    |                    | Date: 27.5.04                                     |                   |  |
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| 2   | OF INVENTOR                                | WONG / /   | Yuk                                |                    | Fan   |                   |  |
|   | INVENTOR'S<br>SIGNATURE                    | TOR'S Signature W  |                                    |                    | Date 27.5.24                                      |                   |  |
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| 2   | FULL NAME<br>OF INVENTOR                   | FAMILY NAME  | FIRST GIVEN NAME                   |                    | SECOND GIVEN NAME                                 | INITIAL           |  |
| _   | INVENTOR'S<br>SIGNATURE                    | Signature  |                                    |                    | Date:   |                   |  |
| o   | RESIDENCE & CITIZENSHIP                    | CITY   | STATE OR FOREIGN C                 | OUNTRY             | COUNTRY OF CITIZENS                               | HIP               |  |

CITY

**POST OFFICE** 

**ADDRESS** 

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